Involvement of NGOs, PRIs, Corporate and Private Sector is being encouraged. New contraceptives have been adopted in the Family Welfare Programme. IEC has been decentralized to state levels.

(b) and (c) The National Population Policy, 2000 affirms the commitment of government towards voluntary and informed choice of family planning methods, best suited to individual acceptors, while availing of reproductive health services and continuation of target free approach in administering family welfare services. Past experience shows that it is not feasible to sustain coercive measures. Further, success of family welfare program in Kerala, Goa andTamil Nadu shows that coercion and disincentives are not required for achieving population stabilisation in the country.

(d)The National Population Policy, 2000 aims to achieve replacement level of fertility by 2010 and a stable population by 2045.

Polio cases

† 516. SHRIMATI SAVITA SHARDA:
SHRIYADLAPATIVENKAT RAO:
SHRI K. KALAVENKATA RAO:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have received complaints regarding children getting afflicted with polio despite being given polio drops;

(b) if so, whether Government have got these complaints examined by specialist; and

(c) if so, the outcome thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) to (c) Yes, Sir. Some cases of children getting afflicted with Polio despite being given polio drops have come to the notice of the government. These cases have been investigated.

† Original notice of the question was received in Hindi.

Oral Polio Vaccine (OPV) is highly effective vaccine but as with every other medication, a small number of children (5-10%) don't respond to the vaccine. If the polio virus is in circulation in the areas it is likely that such children, who have not responded to the OPV, are likely to get afflicted with polio.The only way to assure 100% protection from polio is to eliminate the polio virus and thus stop it from circulating from child to child. It is therefore, even more important that every child under 5 years of age receives polio drops on every pulse polio day, in addition to their routine immunizations.

The National goal is to eradicate polio from the country and obtain international polio-free certification by 2005. The annual strategies for achieving this goal are formulated and implemented on the basis of advice of a group of national and international experts.Two National immunization Days are observed throughout the country for giving polio drops to the children below 5 years of age. In addition, sub-National Immunization days are also observed in States where cases are reported to be increasing. Mop-up vaccination rounds are also conducted in the districts and adjoining areas where new cases are detected.

Following special measures have been taken with special reference to the States where large number of polio cases have been detected:-

(i) In order to improve the detection and vaccination of missed children, the house-to-house vaccination teams have been strengthened with the addition of third member preferably a women from local community.

(ii) House-to-house vaccination of missed children is being done for five days after the booth day as against two days in other parts of the country.

(iii) Additional IEC activities are being conducted.

(iv) The implementation of the programme is being closely monitored at the apex political and official levels in the Government of India as also in the States.

(v) Local influences/social and religious leaders are being involved for advocacy and ensuring greater participation of the people in the programme.

Reimbursement of pending bills of patients under CGHS

517. SHRI RAJU PARMAR:
SHRI BHAGATRAM MANHAR:
SHRI KARNENDU BHATTACHARJEE:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that inspite of a directive from the Delhi High Court Government have not reimbursed the pending bills of patients under the Central Government Health Scheme (CGHS) for medicines purchased from the market;

(b) if so, the details of pending bills with Government as on 31 st January, 2003; and

(c) by when the bills of CGHS beneficiaries are likely to be cleared by Government?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA): (a) No, Sir.

(b) and (c) The receipt of medical rembursement bills of CGHS pensioner beneficiaries is an ongoing process and bills are still being received by the CGHS (HQ) from the beneficiaries/dispensaries. The bills received from the beneficiaries up to 31.1.2003 have been disposed by the CGHS.

Modif iedTB control programme in Orissa

518. SHRI B.J. PANDA:
SHRI RAMACHANDRA KHUNTIA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state: